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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								ss it displays a valid OMB control number Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									OTHER TH	
<u>.</u>	· FOR	· · NUA	NUMBER FILED N		BER EXTRA	RATE	. FEE]	RATE	1
	SIC FEE CFR 1.16(a))				•		1		IXIE	FEE
	TAL CLAIMS CFR 1.16(c))		minus 20 =			X \$ =	1	OR		
INC	EPENDENT CLA	VMS			· · · ·		 	OR -	. X S=	
-	CFR 1.16(b))		minus			× \$=	ļ ·	OR	X \$=	<u> </u>
MU	LTIPLE DEPEND	ENT CLAIM PRES	ENT	(37 CFR 1.16(d))	+5=	·	OR:	+ \$ =	.:	
* 11	* If the difference in column 1 is less than zero, enter *0* in column 2.					TOTAL		OR	TOTAL	
CLAIMS AS AMENDED PART II 33/06 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR OTHER THAT										
-	1	CLAIMS	T	HIGHEST	T			ı	SMALL	ENTITY
ENDMENT		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL F€E
Σ	Total (37 CFR 1.16(c))	24	Minus	29	-	x s =		OR	x s =	
ËN	Independent (37 CFR 1,16(b))	2	Minus	3		X 5 =		OR		
AM	FIRST PRESEN	TATION OF MULTIP	LE DEPENC	DENT CLAIM (37 C	FR 1 16(d))			-	X S =	
						TOTAL ADD'L FEE		OR OR	+ S = TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)		<u> </u>			
AMENDMENT		CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL ⁻ FEE		RATE	ADDI- TIONAL
	To(al (37 CFR 1.16(c))		Minus	••	=	X \$ =				FEE
EN	Independent (37 CFR 1.16(b))	•	Minus	•••	=			OR	X \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (17 CFR 1 1910))					X \$=		OR	X S =	
THE STATE OF THE PERSONNEL COMME (3) OF FIGURE						+s_ = TOTAL ADO'L FEE		OR OR	+ s = TOTAL ADD'L FEE	
	•	(Column 1)		(Column 2)	(Column 3)				Ĺ	
LNI		CLAIMS REMAINING AFTER AMENDMENT		· HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TADNAL FEE		RATE	ADDI- TIONAL
핅	Total (37 CFR 1,16(cl)	-	Minus .	••	= .	x s =				FEE
AMENDMENT	Independent (37 CFR 1 16(b))	•	Minus	•••	=			OR .	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					× s =		OR	x s=	·
(3) CFR 1 Tology						TOTAL ADO'L FEE		OR [+ s =	
•	' If the "Highest t	olumn 1 is less tha Number Previousl Jumber Previously	v Paid For	IN THIS SPACE	is less than 20 a			OR	ADD'L FEE	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.